

Proposal # **2001- H-201** (Office Use Only)

PSP COVER SHEET

Proposal Title: Upper Trinity River Watershed Stewardship Project
Applicant Name: Trinity County Resource Conservation District
Contact Name: Pat Frost
Mailing Address: P.O. Box 1450, Weaverville, CA 96093
Telephone: (530) 623-6004
Fax: (530) 623-6006
Email: tcrd@snowcrest.net

Amount of funding requested: \$300,000

Some entities charge different costs dependent on the source of funds. If it is different for state or federal funds list below.

State cost _____ Federal cost _____

Cost share partners? No

Identify partners and amount contributed by each _____

Indicate the Topic for which you are applying (check only one box):

Natural Flow Regimes	Beyond the Riparian Corridor
Nonnative Invasive Species	<input checked="" type="checkbox"/> Local Watershed Stewardship
Flood Management	Environmental Education
Shallow Water Tidal/Marsh Habitat	Special Status Species Surveys and Studies
Contaminants	Fish Screens

What county or counties is the project located in? Trinity

What CALFED ecozone is the project located in? See the attached list and indicate number. Be as specific as possible 16 Upper Trinity River Watershed

Indicate the type of applicant (check only one box):

State agency	Federal agency
Public/Non-profit joint venture	Non-profit
<input checked="" type="checkbox"/> Local government/district	Private party
University	
Other: _____	